#### FORM D

Notice of Exempt
Offering of Securities

#### **U.S. Securities and Exchange Commission**

Washington, DC 20549

## (See instructions beginning on page 5) Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

134 2287

OMB APPROVAL

OMB Number: 3235-0076

Expires: October 31, 2008

Estimated average burden hours per response: 4.00

Item 1. Issuer's Identity Name of Issuer Entity Type (Select one) Previous Name(s) None Corporation General Finance Corporation Limited Partnership Jurisdiction of Incorporation/Organization Received Limited Liability Company Delaware General Partnership **Business Trust** Year of Incorporation/Organization Other (Specify) (Select one) YENTO Be Formed AShington, Over Five Years Ago ( ) Within Last Five Years 2005 (specify year) 2ΩΣΗibg tems 1 and 2 Continuation Page(s).) (If more than one issuer is filing this notice, check this box 🔲 and identify additional issuer(s) by Item 2. Principal Place of Business and Contact Information Street Address 1 Street Address 2 39 East Union Street City State/Province/Country Phone No. ZIP/Postal Code Pasadena CA 626-584-9722 x1008 91103 Item 3. Related Persons Last Name First Name Middle Name Valenta Ronald OCT 3 0 2008 Street Address 1 Street Address 2 39 East Union SHOMSON REUTERS City State/Province/Country ZIP/Postal Code Pasadena CA 91103 Relationship(s): X Executive Officer X Director Promoter Clarification of Response (if Necessary) (Identify additional related persons by checking this box |X| and attaching Item 3 Continuation Page(s).) Item 4. Industry Group (Select one) Agricultur a **Business Services** Construction Banking and Financial Services **Energy REITS & Finance** Commercial Banking **Electric Utilities** Residential Insurar ce **Energy Conservation** Other Real Estate Investing Coal Mining Retailing Investment Banking **Environmental Services** Restaurants Pooled Investment Fund Oil & Gas Technology Other Energy If selecting this industry group, also select one fund Computers type below and answer the question below: Health Care Telecommunications Hedge Fund Biotechnology Other Technology Privage Equity Fund Health Insurance Venture Capital Fund Travel Hospitals & Physcians Airlines & Airports Other Investment Fund **Pharmaceuticals Lodging & Conventions** Is the issuer registered as an investment Other Health Care company under the Investment Company **Tourism & Travel Services** Manufacturing Act of 1940? Yes Other Travel **Real Estate** Other Banking & Financial Services Commercial Other

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Item 5. Issuer Size (Select one)

Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)	specifying "hedge" or "other investment" fund in				
○ No Revenues	OR No Aggregate Net Asset Value				
\$1 - \$1,000,000	\$1 - \$5,000,000				
\$1,00,001 - \$5,000,000	\$5,000,001 - \$25,000,000				
\$5,00,001 - \$25,000,000	\$25,000,001 - \$50,000,000				
\$25,( 00,001 - \$100,000,000	\$50,000,001 - \$100,000,000				
Over \$100,000,000	Over \$100,000,000				
O Decline to Disclose	O Decline to Disclose				
Not Applicable	O Not Applicable				
Item 6. Federal Exemptions and Exclusions Cl	aimed (Select all that apply)				
	Investment Company Act Section 3(c)				
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1) Section 3(c)(9)				
Rule 504(b)(1)(i)	Section 3(c)(2) Section 3(c)(10)				
Rule 504(b)(1)(ii)	Section 3(c)(3) Section 3(c)(11)				
Rule 504(b)(1)(iii)	Section 3(c)(4) Section 3(c)(12)				
Rule 505	Section 3(c)(5) Section 3(c)(13)				
☐ Rule 506	Coction 3/c)/6)				
Securities Act Section 4(6)					
Item 7. Type of Filing	Section 3(c)(7)  Mell Pina  ent  OR First Sale Yet to Occur				
New Notice OR	ent Section Since				
Date of First Sale in this Offering: 10/01/2008	OR First Sale Yet to Occur				
Item 8. Duration of Offering	OR First Sale Yet to Occur				
Does the issuer intend this offering to last more tha					
Item 9. Type(s) of Securities Offered (Select all that apply)					
X Equity	Pooled Investment Fund Interests				
☐ Debt	Tenant-in-Common Securities				
Option, Warrant or Other Right to Acquire Another Security	<ul><li>Mineral Property Securities</li><li>Other (Describe)</li></ul>				
Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security					
Item 10. Business Combination Transaction					
Is this offering being made in connection with a busi transaction, such as a merger, acquisition or exchange of					
Clarification of Response (if Necessary)					

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item 11. Minimum investment			
Minimum investment accepted from any outside	de investor \$ Not applicable		
Item 12. Sales Compensation			
Recipient	Recipient CRD Number		
			☐ No CRD Number
(Associated) Broker or Dealer	(Associated) Broker or Dea	ler CRD Nu	mber
			☐ No CRD Number
Street Address 1	Street Address 2		····
City	State/Province/Country ZIP/Postal Cod	e	
States of Solicitation All States			
☐ AL ☐AK │ ☐AZ ☐ AR ☐ C	A CO CT DE DC	FL	☐GA ☐HI ☐ID
□ IL □ IN □ IA □ KS □ K	Y LA ME MD MA	∐ мі	■MN ■MS ■MO
☐ MT ☐ NE ☐ NV ☐ NH ☐ N		□ОН	OK OR PA
RI SC SD TN T		☐ wv	☐ WI ☐ WY ☐ PR
	· · · · · · · · · · · · · · · · · · ·	and attach	ing Item 12 Continuation Page(s).)
Item 13. Offering and Sales Amounts	<u> </u>		
(a) Total Official Amount \$ 30.00	000,000		
(a) Total Offering Amount		OR	☐ Indefinite
(b) Total Amoun: Sold \$ 30,00	00,000		
(c) Total Remairing to be Sold \$ -0-		OR	☐ Indefinite
(Subtract (a) from (b))  Clarification of Response (if Necessary)		•	indefinite
Claimedian of Mispanse (infecessary)			
Item 14. Investors			
Check this box [>] if securities in the offering hav	re been or may be sold to persons who do not q	ualify as ac	credited investors, and enter the
number of such rion-accredited investors who all	ready have invested in the offering: 6		
	<u> </u>		
Enter the total number of investors who already	have invested in the offering:		
	- <u>[··</u>		
Item 15. Sales Commissions and Find	ders' Fees Expenses		
Provide separately the amounts of sales commiss check the box next to the amount.	sions and finders' fees expenses, if any. If an an	nount is no	t known, provide an estimate and
	Sales Commissions \$ -0-		Estimate
	Finders' Fees \$ -0-	•••	
Clarification of Response (if Necessary)	Finders' Fees \$ [-0-		Estimate
L			

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Item 16. Use of Proceeds	
Provide the amount of the gross proceeds of the offering that has been or is used for payments to any of the persons required to be named as ex directors or promoters in response to Item 3 above. If the amount is unknestimate and check the look next to the amount.	ecutive officers, \$ -0-
Clarification of Response (if Necessary)	
	ng. The purchasers sold their stock of Mobile for cash, a subordinated promissory note and c of General Finance Corporation.
Signature and Submission	
Please verify the information you have entered and review the Te	erms of Submission below before signing and submitting this notice.
Terms of Submission. In Submitting this notice, each ide	entified issuer is:
the State in which the issuer maintains its principal place of bus process, and agreeing that these persons may accept service or such service may be made by registered or certified mail, in any against the issuer in any place subject to the jurisdiction of the lactivity in connection with the offering of securities that is the sprovisions of: (i) the Securities Act of 1933, the Securities Exchar Company Act of 1940, or the Investment Advisers Act of 1940, or State in which the issuer maintains its principal place of business	C and the Securities Administrator or other legally designated officer of iness and any State in which this notice is filed, as its agents for service of a its behalf, of any notice, process or pleading, and further agreeing that Federal or state action, administrative proceeding, or arbitration brought United States, if the action, proceeding or arbitration (a) arises out of any subject of this notice, and (b) is founded, directly or indirectly, upon the age Act of 1934, the Trust Indenture Act of 1939, the Investment or any rule or regulation under any of these statutes; or (ii) the laws of the
110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require "covered securities" for purposes of NSMIA, whether in all instances or croutinely require offering materials under this undertaking or otherwise so under NSMIA's preservation of their anti-fraud authority.  Each identified is suer has read this notice, knows the contents to	onal Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, e information. As a result, if the securities that are the subject of this Form D are due to the nature of the offering that is the subject of this Form D, States cannot e and can require offering materials only to the extent NSMIA permits them to do to be true, and has duly caused this notice to be signed on its behalf by the
undersigned duly authorized person. (Check this box in Item 1 above but not represented by signer below.)	attach Signature Continuation Pages for signatures of issuers identified
Issuer(s)	Name of Signer
General Finance Corporation	Christopher A. Wilson
Signature	Title
Contagina - Colo	General Counsel, Vice President & Secretary
Number of continuation pages attached:	Date
	October 17, 2008

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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#### **Item 3 Continuation Page**

Last Name	First Name		Middle Name
Connell	David		M.
Street Address 1		Street Address 2	
39 East Union Street			
City	State/Province/Country	ZIP/Postal Code	
Pasadena	CA	91103	
Relationship(s): Executive	Officer 🔀 Director 🗌 Promoter		
Clarification of Response (if Neces	sary)		
<del> </del>			
Last Name	First Name		Middle Name
Glascott	Lawrence		P.
Street Address 1		Street Address 2	
39 East Union Street			
City	State/Province/Country	ZIP/Postal Code	
Pasadena	CA	91103	
Relationship(s): Executive	Officer Director Promoter		
Clarification of Response (if Neces	ssary)		W 80 18 1 8 1
Last Name	First Name		Middle Name
Havner, Jr.	Ronald		L.
Street Address 1		Street Address 2	
39 East Union Street			
City	State/Province/Country	ZIP/Postal Code	
Pasadena	CA	91103	
Relationship(s): Executive	Officer X Director Promoter		
Clarification of Response (if Neces			
Connection of New Yorks (III Needs			
Last Name	Circa Nama		Middle Name
Marrero	First Name		Middle Name
IIYIALIEIO	Manuel	Street Address 2	
Street Address 1			
Street Address 1  39 East Union Street	State/Province/Country	ZIP/Postal Code	
Street Address 1  39 East Union Street City	State/Province/Country	ZIP/Postal Code	
Street Address 1  39 East Union Street  City  Pasadena		ZIP/Postal Code 91103	

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#### **Item 3 Continuation Page**

Item 3. Related Persons (Continued) Last Name First Name Middle Name Roszak James В. Street Address 1 Street Address 2 39 East Union Street State/Province/Country ZIP/Postal Code 91103 Pasadena Relationship(s): Clarification of Response (if Necessary) Last Name First Name Middle Name **Barrantes** Charles Ė. Street Address 1 Street Address 2 39 East Union Street City State/Province/Country ZIP/Postal Code CA 91103 Pasadena Relationship(s): X Executive Officer Director Promoter Clarification of Response (if Necessary) Last Name Middle Name First Name **Johnson** John 0. Street Address 2 Street Address 1 39 East Union Street City State/Province/Country ZIP/Postal Code CA 91103 Pasadena Relationship(s): X Executive Officer Director Promoter Clarification of Response (if Necessary) Last Name Middle Name First Name Wilson Christopher A. Street Address 1 Street Address 2 39 East Union Street City State/Province/Country ZIP/Postal Code 91103 Pasadena Relationship(s): X Executive Officer Director Promoter Clarification of Response (if Necessary)

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#### **Item 3 Continuation Page**

Item 3. Related Persons (Continued) Last Name First Name Middle Name Allan Robert Street Address 1 Street Address 2 39 East Union Street City State/Province/Country ZIP/Postal Code 91103 Pasadena Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary) Last Name Middle Name First Name Theodore Μ. Mourouzis Street Address 1 Street Address 2 39 East Union Street City State/Province/Country ZIP/Postal Code CA 91103 Pasadena Relationship(s): XX Executive Officer Director Promoter Clarification of Response (if Necessary) Last Name Middle Name First Name Street Address 2 Street Address 1 State/Province/Country ZIP/Postal Code City Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary) **Last Name** Middle Name First Name Street Address 2 Street Address 1 State/Province/Country City ZIP/Postal Code Executive Officer Director Promoter Relationship(s): Clarification of Response (if Necessary)

(Copy and use additional copies of this page as necessary.)
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